WHITPAIN TOWNSHIP

960 Wentz Road Blue Bell, PA 19422

P: (610) 277-2400 | F: (610) 277-2209

Application for Township Road Occupancy Permit

<u>-</u>	yer ID #:		
==	hip Inspection Fee:hip Escrow:		
Description of Work:			
Under and subject to all the conditions, restrictions and regulations prescribed by the Township and on the general provisions and specifications, a true copy whereof is attached and made a part hereof, with the same force and effect as if written or printed herein and under the subject to the special conditions, restrictions and regulations hereinafter set forth.			
Escrow amount assessed as follows:			
1) Surface openings for driveways/driveway aprons/curbing/sidewalks: Escrow fee of \$15.00 per linear foot with a minimum escrow of \$200.00			
2) Surface openings for trenching/roadway disturbance: Escrow fee of \$15.00 per linear foot with a minimum escrow of \$200.00			
3) Utility pole removal/relocation/installation: Escrow fee of \$10.00 per pole with a minimum escrow of \$100.00			
Once work is complete, a Township inspection is required. When the work meets W			
Approximate date when work will begin: Approximate date when work will be completed: General: The road surface is improved to a width of feet. Distance from center line of roadway to gutter or ditch: feet. Distance from center line of road to right-of-way line: feet. Pole & Towers: Number of poles to be erected: Nearest distance from center of road to structure: feet. Distance of proposed work along the road: feet. Pipelines & Conduits: The improved surface of the road WILL/WILL NOT be opened. Approximate area of opening in improved surface: sq. ft. Approximate area of openings on unimproved part: sq. ft. Length of trench along road: feet. Depth of trench below surface: inches.			
The Applicant is a Corporation incorporated under the law of Pennsylvania.			
(Corporate Seal) Name of Applicant: _			
Authorized Representa	ative Signature:		
General Instructio	•		
Any work performed within the right-of-way of a Township road requires submis sketch showing location and details of proposed work. Any work performed on a To state highway requires a state permit. The prescribed permit fee shall accompany request. No lane restrictions or lane closures may occur without prior written notification to minimum of five (5) days prior to anticipated work, and it must comply with PennD plans. All documentation related to the lane restriction or lane closure must be reversitive (5) days prior to the anticipated start of work. The approved Township Road (including but not limited to plans and details) regarding lane restrictions.	sion of one (1) copy of this form along with one (1) copy of a swnship road over, under, or within the limits of a limited access the application and sketch. Schedules of fees are furnished on the Township Engineer's office. Notification must be made a OT Publication 213 regulations and include any required detour liewed and approved by the Township Engineer's office at least way Occupancy Permit must include any relevant information		

THE FEE SHALL BE PAID BY CHECK OR MONEY ORDER AND SHALL BE MADE PAYABLE TO WHITPAIN TOWNSHIP.

Application #: _____ Fee Received \$: ____ Date: _____

CODE ENFORCEMENT OFFICE

WHITPAIN TOWNSHIP
960 Wentz Road
Blue Bell, PA 19422
buildingandzoning@whitpaintownship.org

Phone: (610) 277-2400 Fax: (610) 277-2209 Office Hours: Mon.-Fri. 1-2 p.m. & By Appointment

Workers Compensation Insurance Coverage Information (Required for all Building Permits)

<u>The Applicant Is</u> (please check one only):

- □ **A Contractor.** An insurance certificate indicating workers compensation insurance coverage and Whitpain Township as the certificate holder is required before your permit can be issued. Your insurance provider may fax the certificate to 610-277-2209, then forward the original by mail to expedite the permitting process. It is the contractor's obligation to obtain insurance certificates and affidavit documentation from all subcontractors.
- □ The Property Owner Not A contractor. Your permit will be issued indicating that you may not hire others to perform work associated with the building permit unless the workers compensation insurance certificate and/or affidavit documents are obtained.
- □ A Contractor With No Employees. Your permit will be issued indicating that you may not hire others to perform work associated with the permit unless the workers compensation insurance certificate and/or affidavit documents are obtained.
- □ Claiming A Religious Exemption To The Insurance Requirement. Your permit will be issued indicating that you may not hire others to perform work associated with the permit unless the workers compensation insurance certificate and/or affidavit documents are obtained.

Insurance Information:		
Name of Applicant (Please Print)	:	
Federal Employer Tax ID Number		
Workers Compensation Insurance Provider		
Insurance Policy#		
Policy Expiration Date		
Subscribed and sworn before me this	I understand that compliance with Act 44, The Pennsylvania	
Day of 20	Workers Compensation Insurance Reform Law, is a condition	
	Of my permit. I understand I have the obligation to provide	
	Written notification to the township of any changes in my	
Signature of Notary Public	Insurance status. I understand that state law requires the Code	
Ç	Enforcement Office to issue a stop work order if the insurance	
My commission expires	Documentation requirements of the act are not maintained, or if	
• • • • • • • • • • • • • • • • • • • •	Uninsured and/or undocumented workers are at work on any	
	Project associated with a building permit.	
Signature:		

APPLICANT SIGNATURE REQUIRED

Un-notarized affidavits will be notarized by the township is signed in the presence of the notary when dropped off.

A 2.00 notary fee will be added to the permit fee and collected at the time the permit is issued.

UTILITY SKETCH SURFACE OPENING

LESS THAN 500 LF.

Applicant_	Application No	County
Contact Person	Telephone No. ()	
Municipality		
Number of Openings	Size of Opening(s)	(neatly sketch below)
Indicate distance and direction to nearest intersection		ft. (North, South East, West)
Type of Pavement:	Type of Shoulder:	
Bituminous	Paved	Show
Stabilized	Stabilized	NOTUI
Concrete	Other	
Concrete w/ Bituminous Surface		
Legal Right of Way		
Edge of Shoulder (curb)		
Edge of Pavement		
Centerline		
Edge of Pavement		
Edge of Shoulder (curb)		
Legal Right of Way		



DRIVEWAY MODIFICATION FORM

Property Owner:	
	Applicant Email:
Contractor Name:	
Contractor Phone #:	Contractor Email:
Contractor Address:	
New Impervious Area (SF):(Note: New impervious area is th unimproved land – i.e	e area of new pavement/gravel to be installed upon ., areas of grass, landscaping, soil, etc.) ED DRIVEWAY MODIFICATION MUST BE
SUBMIT	TED WITH THIS FORM.
Applicant Signature	Date
Mail or hand deliver application to: Whitpain Township Engineering Department 960 Wentz Road Blue Bell, PA 19422	
	Application #: Fee Received \$:

Date: _____